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APPLICANTS

Timothy J. Hoffman, Columbia, MO;

Wynn A. Volkert, Columbia, MO;

Gary Sieckman, Ashland, MO; Charles J. Smith, Columbia, MO;

Hariprasad Gali, Columbia, MO;

**** CONTINUING DATA *******

This application is a CIP of 09/537,423 03/29/2000 ABN
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**** FOREIGN APPLICATIONS *******

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**** 05/25/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MO	SHEETS DRAWING 32	TOTAL CLAIMS 61	INDEPENDENT CLAIMS 4
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ADDRESS

Kohn & Associates
 Suite 410
 30500 Northwestern Highway
 Farmington Hills, MI
 48334

TITLE

GASTRIN RECEPTOR-AVID PEPTIDE CONJUGATES

FILING FEE RECEIVED 829	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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